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CONFIRMATION NO. 3809

SERIAL NUMBER	FILING or 371(c) DATE 02/13/2004 RULE	CLASS 709	GROUP ART UNIT 2136	ATTORNEY DOCKET NO. CITI0286-US
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APPLICANTS

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
05/11/2004

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	CA	2	40	3		

ADDRESS

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TITLE

System and method for secure message reply

FILING FEE RECEIVED 1260	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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